

FRIDAY NIGHT REGISTRATION FORM

MAY 10, 2013

Name: _____ Telephone: _____

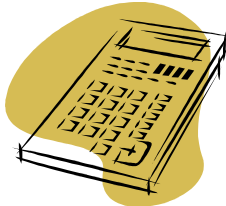
Yes! I want to register and PAY for Friday Night.

Please check **ONLY ONE**:

- _____ Own Room
- _____ Two people in room
- _____ Three people in room
- _____ Four people in room

FRIDAY NIGHT	REMEMBER! ADD THE COST FOR FRIDAY NIGHT TO THE COST OF THE REGULAR REGISTRATION!
\$145	
\$ 75 EACH Person	
\$ 50 EACH Person	
\$ 40 EACH Person	

Conference Fee Calculator

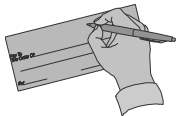


Friday Night Costs: _____ +

Saturday Night Costs: _____ =

Total Costs: _____ .

mail **THIS FORM & YOUR BLUE SATURDAY / SUNDAY REGISTRATION FORM** to:



San Diego Self-Advocacy Conference

8525 Gibbs Drive, Suite 209, San Diego, 92123

Vendor #: PM0859

***Roommate:** You **MUST** list your roommate(s) on your registration form. We cannot find a roommate for you! **IF YOU LEAVE THIS BLANK, YOUR REGISTRATION WILL NOT BE PROCESSED.**

1. _____
2. _____
3. _____

THIS FORM IS FOR FRIDAY NIGHT ONLY!!!
YOU MUST COMPLETE THE REGULAR REGISTRATION FORM AND INCLUDE IT, ALONG WITH YOUR TOTAL PAYMENT!

ATTACH THIS FORM TO THE BLUE CONFERENCE REGISTRATION FORM.

If you have questions, call Carmel at (858) 571-7803 x 118 or Laura at (858) 278-5420 x 132
between 8 a.m. & 4 p.m., Monday – Friday